

OVERVIEW OF MARYLAND'S POPULATION

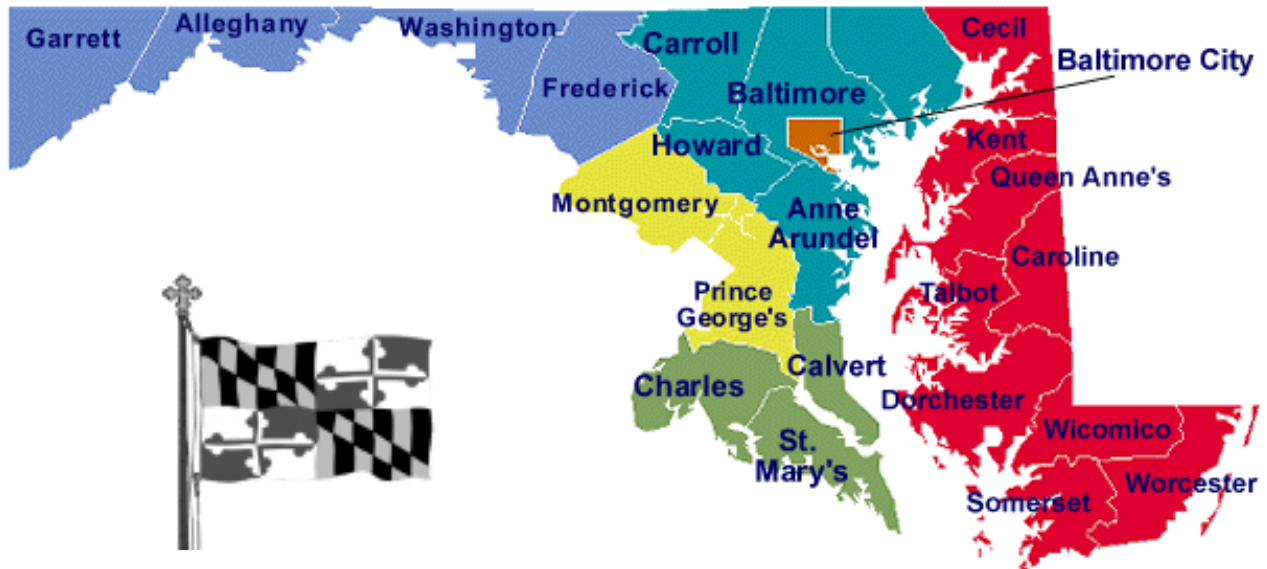
MARYLAND AT A GLANCE*

	Maryland	U.S.
Demographics^{1,2}		
Total resident population (in 1,000), 1998	5,135	270,299
Under age 5 population (as % of total), 1998	6.7	7.0
Age 65+ population (as % of total), 1998	11.5	12.7
Non-white & Hispanic population (as % of total), 1998	35.2	27.7
Health Status^{3,4,5,6,7}		
Vaccine coverage for children 19-35 mos (% of), 1998	79	81
Smokers-- adult population (% of), 1998	22.4	22.9
AIDS cases reported per 100,000 pop., 1998	31.9	17.1
Infant Mortality (total), 1998	8.6	7.2
Low birth weight babies (% of)		
White Rate	6.4	6.5
African-American Rate	13.1	13.0
Health Care Coverage and Economic Status^{8,9,10,11,12,13}		
Nonelderly insurance status (% of pop.) 1995-97 average		
Total private (% of)	76.9	70.7
Medicaid and other public (% of)	7.8	11.4
Total enrollment in HMOs (as % of pop./insured pop), 1998	34.9/40.5 ...	29.2/34.7
Total uninsured (% of pop.) 1996-98 average	13.8	16.0
Uninsured by race (%), (White/Minority), 1995-97 average	9.6/21.2	11.8/26.2
Cost of employment-based family health coverage, 1998		
Total premium (average per employee)	\$5,070	\$4,953
Employee contribution (average per employee)	\$1,647	\$1,439
Personal income per capita, 1998	\$30,023	\$26,482
Median family income, 1998	\$55,702	\$42,471
Unemployment rate (% of civilian work force), 1998	4.6	4.5
Resources Available,^{9,14}		
Primary Care Physicians** per 100,000 pop., 1997	103	84
Physician Specialists** per 100,000 pop., 1997	208	145
Registered Nurses per 100,000 pop., 1998	845	829
Population underserved by Primary Care MDs (% of), 1997	2.2	9.6
Utilization of Services¹⁵		
Average stay in community hospitals, 1997 (days)	5.5	6.1
Outpatient visits (incl. ER) to all hospitals (per 1,000 pop.), 1997	1063.7	1681.9
Emergency room visits to community hospitals (per 1,000 pop.) 1997	316.3	346.8

* Adapted from: "State Health Care Expenditures, Experience from 1998," Maryland Health Care Commission, January, 2000, Baltimore, MD.

** Count of nonfederal physicians (MDs or Osteopaths) in patient care: primary care is general or family practice, general internal medicine and general pediatrics; specialists are all other types of specialties, including OB/GYN.

Maryland is a diverse and varied State, both geographically and economically. Though small in size (only 9,843.62 sq. miles), with a 1999 population estimate of 5,171,634, the State ranked 19th in population, and 6th nationally in population density. Its geographic diversity is showcased by the Appalachian Mountains to the west and the Chesapeake Bay and Atlantic Ocean to the east. Frederick County has the largest land area (662.72 square miles), and Baltimore City has the smallest (80.34 square miles).

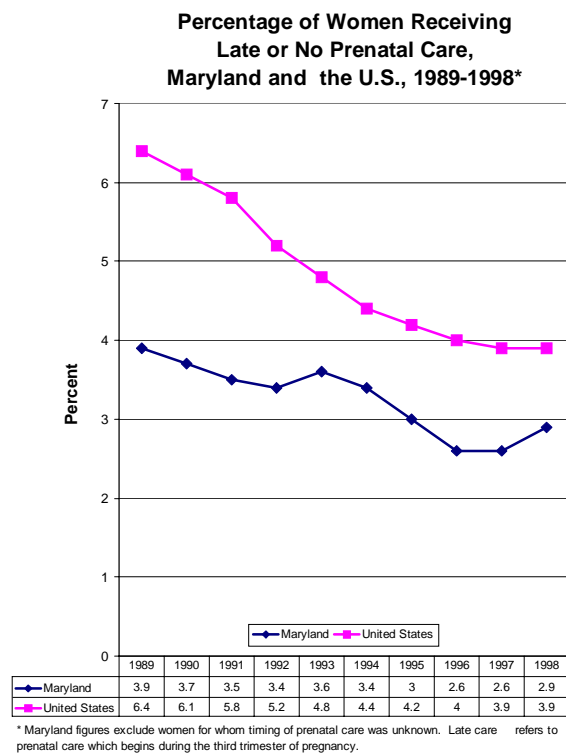
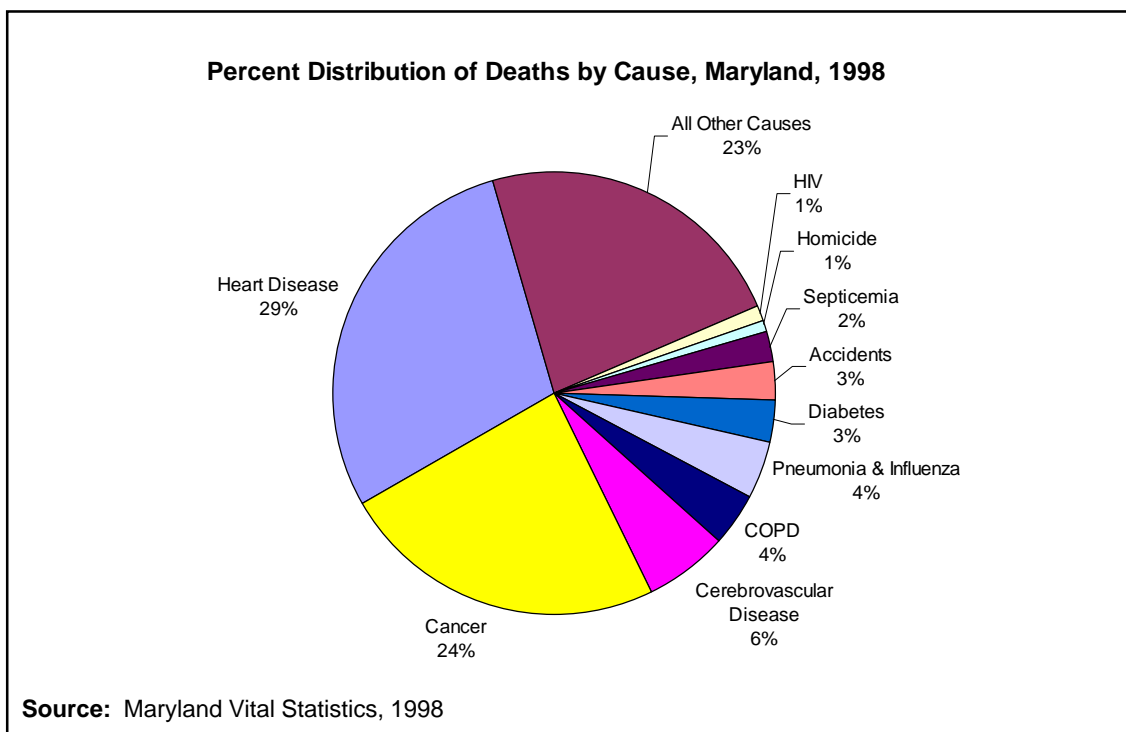


Maryland has much to be proud of, and, as any state, also has areas which need improvement. As a state, Maryland ranks first in the nation in the percentage of professional and technical workers in the workforce. Our State ranks first in the rate of high school completions (95%, compared to 86% for the nation), and second among the 50 states in the percentage of the population (31.8%) age 25 years and older who have completed a bachelor's degree or more. Maryland's median household income of \$50,016 is the second highest in the nation, placing the State 29% above the national average. Maryland residents experience the lowest poverty rate in the nation, with 7.2% of the population living below the poverty level, compared to 12.7% for the United States as a whole. The Children's Rights Council, a national child advocacy organization, recently ranked Maryland as the seventh best state in the United States in which to raise a child. In the Mid Atlantic States, Maryland ranks first.

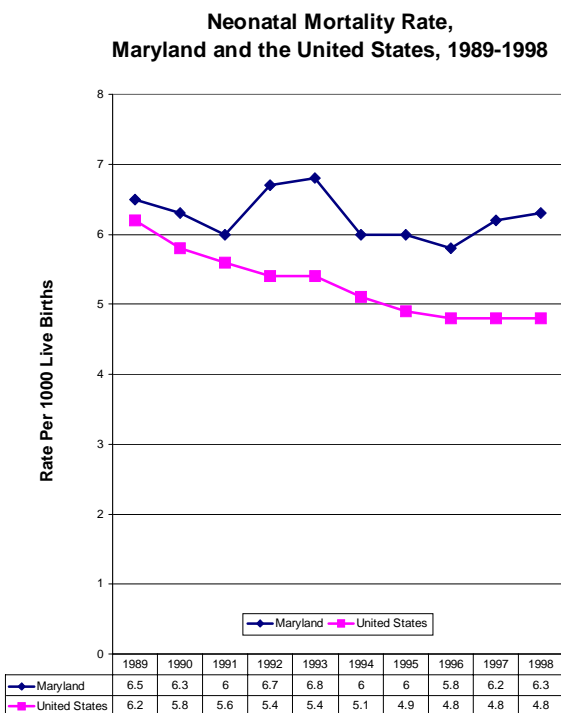
As impressive as this information is, certain segments of Maryland's population do not demonstrate the same progress as their national counterparts. The health status of some Marylanders has shown declining health, indicating an increased need for intervention. Areas which need increased attention include care for infants and children, heart disease, and influenza and pneumonia vaccinations. Both the percentage of births to women receiving late or no prenatal care and neonatal death rates were slightly higher in 1998 than in 1997.

Heart disease remains the leading cause of death, even though the age-adjusted mortality rate for heart disease has declined by 26% over the last 100 years. The combined death rate from pneumonia and influenza are still important, and actually rose from 1997 to 1998. Diabetes and HIV are also leading causes of death in Maryland.

The following graphics provide a picture of Maryland's overall health status:

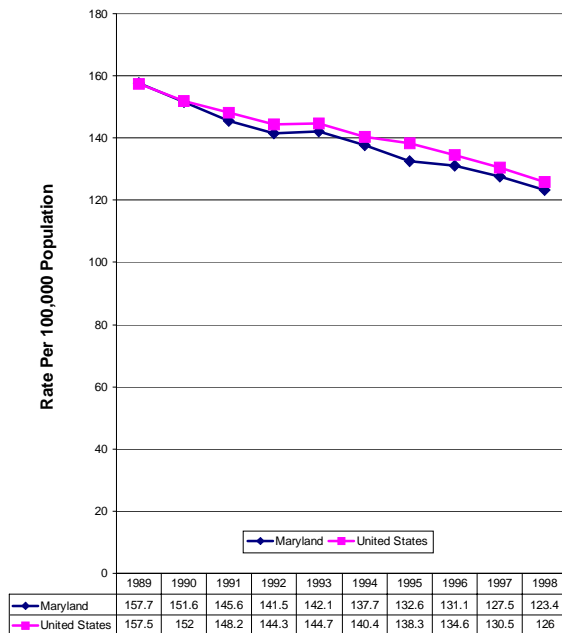


Source: Maryland Vital Statistics, 1998



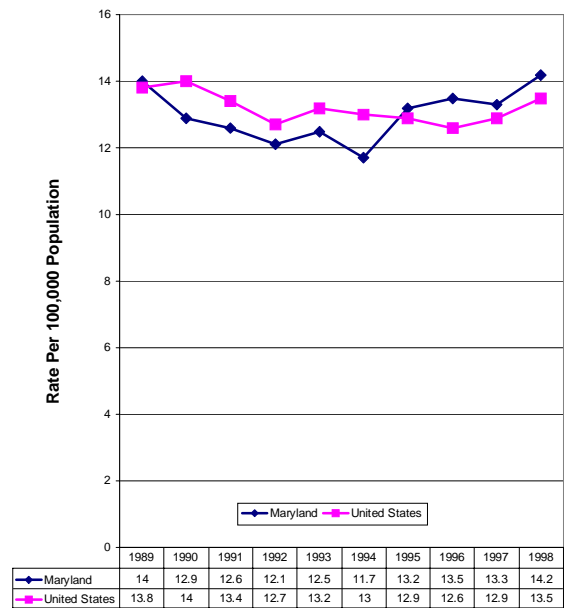
Source: Maryland Vital Statistics, 1998

Age-Adjusted Death Rate for Diseases of the Heart, Maryland and the U.S., 1989-1998



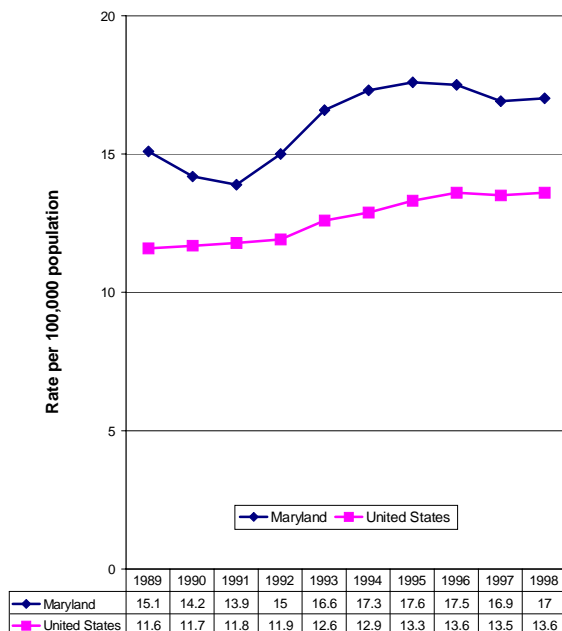
Source: Maryland Vital Statistics, 1998

Age-Adjusted Death Rate for Pneumonia and Influenza, Maryland and the U.S., 1989-1998



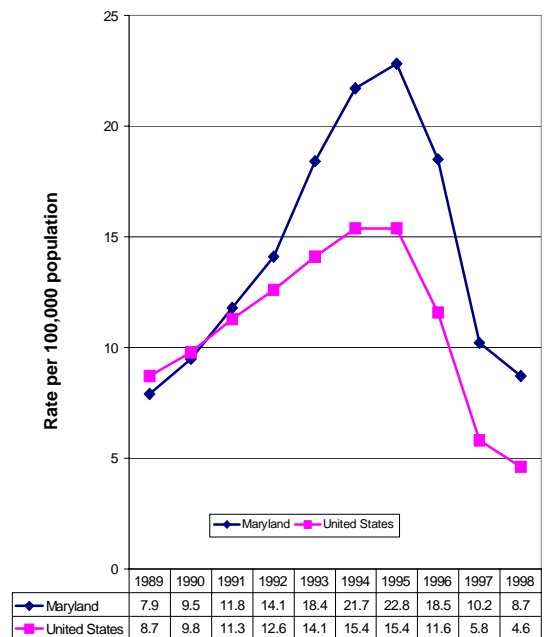
Source: Maryland Vital Statistics, 1998

Age-Adjusted Death Rate for Diabetes, Maryland and the U.S., 1989-1998



Source: Maryland Vital Statistics, 1998

Age-Adjusted Death Rate for Human Immunodeficiency Virus, Maryland and the U.S., 1989-1998



Source: Maryland Vital Statistics, 1998

Data Sources

- ¹ From "Population Estimates for the U.S., Regions, and State by Selected Age Groups and Sex: Annual Time Series, July 1, 1990 to July 1, 1998 (includes revised April 1, 1990 census population counts)," U.S. Department of Commerce, U.S. Census Bureau, Population Division, Population Distribution Branch, *U.S. Census Bureau Web Site*. Website: <http://www.census.gov/population/estimates/state/st-99-09.txt>. Accurate as of July 15, 1999. Regional estimates derived from: "1998 Population for Maryland Jurisdictions," September, 1999, Maryland Office of Planning. Website: <http://www.op.state.md.us/MSDC>.
- ² "Population Estimates for States by Race and Hispanic Origin: July 1, 1998." U.S. Department of Commerce, Census Bureau, Population Division, Population Distribution Branch. Website: <http://www.census.gov/population/estimates/state/srh/srh98.txt>. Accurate as of September 15, 1999.
- ³ "Births and Deaths: Preliminary Data for 1998." By J. A. Martin, B. L. Smith, T. J. Mathews, and S. J. Ventura, 1999, *National Vital Statistics Reports*, 47 (25), Hyattsville, MD: National Center for Health Statistics. NOTE: Rates reported in Table are not age-adjusted.
- ⁴ *Maryland Vital Statistics 1998 Preliminary Report*, Maryland Department of Health and Mental Hygiene, Division of Health Statistics, 1998, Baltimore, MD, 1998. NOTE: Rates reported in Table 1 are not age-adjusted.
- ⁵ "Table 2a. Estimated Vaccination Coverage with Individual Vaccines among Children 19-35 Months of Age by Census Division and State--United States," from the National Immunization Survey, 1998, Centers for Disease Control and Prevention, National Center for Health Statistics, National immunization Survey. Website: <http://www.cdc.gov/nip/coverage>.
- ⁶ *1998 Behavioral Risk Factor Surveillance Summary Prevalence Report*, Centers for Disease Control and Prevention, June 18, 1999. Atlanta, GA: Centers for Disease Control and Prevention. NOTE: U.S. estimate includes Puerto Rico.
- ⁷ "Table 2: rate reported for U.S. includes the 50 states and the District of Columbia, but excludes U.S. dependencies, possessions, and associated nations," Centers for Disease Control and Prevention, 1998, *HIV/AIDS Surveillance Report*, 10 (2), 8. Regional estimates derived from: "AIDS Cases by Maryland County Diagnosed in 1998 and Reported through March, 1999," Maryland Department of Health and Mental Hygiene, AIDS Administration, 1999. Report. Baltimore, MD.
- ⁸ "Current Population Reports, Series P620-208," by J.A. Campbell and the U.S. Bureau of the Census, 1999, *Health Insurance Coverage: 1998*. Washington, DC: U.S. Government Printing Office.
- ⁹ *Reforming the Health Care System: State Profiles 1999*, by J. Lamphere, N. Brangan, S. Bee, and K. Griffin, 1999, Washington, DC: Public Policy Institute/American Association of Retired Persons.
- ¹⁰ Maryland Health Care Commission (MHCC) calculations based on (1) population estimates from citation no. 1; (2) percent insured from citation 9; (3) national number enrolled in HMOs from *The InterStudy Competitive Edge*, 9 (2); *Part II: HMO Industry Report*; Minneapolis, MN; and (4) Maryland residents enrolled in HMOs estimated by MHCC from Maryland Insurance Administration annual filings adjusted to include residents in HMO contracts located outside of Maryland.
- ¹¹ **National:** "Unemployment Rate -- Civilian Labor Force, Age 16 Years and Older, Seasonally Adjusted," U.S. Department of Labor, Bureau of Labor Statistics. Labor Force Statistics from the Current Population Survey. Web site: <http://www.bls.gov/cps/home.htm>. NOTE: Monthly statistics were averaged to produce yearly figure. **State:** "Maryland Civilian Labor Force, Employment and Unemployment by Place of Residence -- 1978-1998" Maryland Department of Labor, Licensing, and Regulation. Website: <http://www.dlir.state.md.us/lmi/78.htm>. **Counties:** "Regional Data --1990 to 1998 Annual Averages, Civilian Labor Force, Employment and Unemployment by Place of Residence," Maryland Department of Labor, Licensing, and Regulation. Website: <http://www.dlir.state.md.us/lmi/9097avg.htm>.

- ¹² **National and state:** "Regional Accounts Data, State Personal Income," U.S. Department of Commerce, Economic and Statistics Administration, Bureau of Economic Analysis. Website: <http://www.bea.doc.gov/bea/regional/spi/>. **Counties:** Maryland Office of Planning, Research and State Data Center, Bureau of Economic Analysis data.
- ¹³ U.S. Agency for Health Care Policy and Research, Center for Cost and Financing Studies, 1996. MEPS IC-001: *1996 Employer-Sponsored Health Insurance Data*. **Total premium:** "Table 2U, 1996 Medical Expenditure Panel Survey, Insurance Component." Refers to the average family premium paid by private sector establishments that offer health insurance for family coverage per enrolled employee. Excludes temporary and contract workers. If more than one family rate was offered, the cost for a family of four was collected. **Employee contribution:** "Table 2V: 1996 Medical Expenditure Panel Survey, Insurance Component." Refers to the average contribution by an enrolled employee, excluding temporary or contract workers, for family coverage at private-sector establishments that offer health insurance. If more than one family rate was offered, the cost for a family of four was collected.
- ¹⁴ Maryland Health Care Commission calculations based on: (1) American Medical Association Physician Masterfiles; (2) American Osteopathic Association data; and (3) Bureau of the Census State and County Population Estimates; all contained in U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions' *Area Resource File: February 1999 Release*.
- ¹⁵ *Health Care State Rankings*, (7th ed.), by K. Morgan, S. Morgan, N. Quitno (Eds.), 1999, Lawrence, KS: Morgan Quitno Press. NOTE: Primary care physicians, p.437; Physician specialists, p.445; Physician assistants, p.481; Occupancy rate in community hospitals, p. 212; Average stay in community hospitals, p.211; Admission to community hospitals, p. 208; Outpatient visits to community hospitals, p. 213; Emergency outpatient visits to community hospitals, p. 214; Surgical operations in community hospitals, p. 7. Population estimates derived from U.S. Department of Commerce, Census Bureau. "Total Resident Population on July 1, 1997." Website: <http://www.census.gov/population/www/estimates/statepop.html>. Accurate as of October, 1998.

HIGHLIGHTS, BY FOCUS AREAS, OF THE FULL HEALTH IMPROVEMENT PLAN
